

Late Independent Expenditure Report

Type or print in ink.
Amounts may be rounded to whole dollars.

LATE INDEPENDENT EXPENDITURE REPORT

NAME OF FILER American Federation of State, County & Municipal Employees - CA People & AFSCME AFL-CIO - supporting Jerry Brown for Governor 2010			Date of This Filing 08/04/2010 Report No. 3142 <input type="checkbox"/> Amendment to Report No. _____ (explain below) No. of Pages 2	Date Stamp Page 1 of 2	CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER () -		I.D. NUMBER (if applicable) 1270707			
STREET ADDRESS					
CITY Sacramento	STATE CA	ZIP CODE 95814-			

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED Meg Whitman				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED				
OFFICE SOUGHT OR HELD/DISTRICT NO. Governor		SUPPORT	OPPOSE X	BALLOT NO./LETTER		JURISDICTION	SUPPORT	OPPOSE

2. Independent Expenditures Made

Attach additional information on appropriately labeled continuation sheets.

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
08/04/2010	Television Ad	\$1,600,000.00
08/03/2010	Television Ad	\$400,000.00

Reason for Amendment:

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CALIFORNIA
FORM 496

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American Federation of State, County & Municipal Employees - CA People & AFSCME AFL-CIO - supporting Jerry Brown for Governor 2010

I.D. NUMBER (If applicable)
1270707

3. Contributions of \$100 or More Received*

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE**	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED	INTEREST RATES
8/2/2010	American Federation of State, County & Municipal Employees AFL-CIO Washington, DC 20036- ID: 745604	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500,000.00	If loan, enter interest rate, if any _____ %
8/3/2010	American Federation of State, County & Municipal Employees - CA People (AFSCME CA People) Sacramento, CA 95814 ID: 960772	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$50,000.00	If loan, enter interest rate, if any _____ %
8/3/2010	Union of American Physicians & Dentist Medical Defense Fund Oakland, CA 94612 ID: 811278	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$50,000.00	If loan, enter interest rate, if any _____ %
8/3/2010	United Domestic Workers of America Action Fund San Diego, CA 92103 ID: 1302384	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$300,000.00	If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %

*Major donor and independent expenditure committees that do not receive contributions are not required to complete Part 3.

**Contributor Codes

IND - Individual
COM - Recipient Committee (other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

FPPC Form 496 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC
866/275-3772